



Individual Health Care Plan – Educational Setting

FOR PUPILS WITH DIABETES

Name:

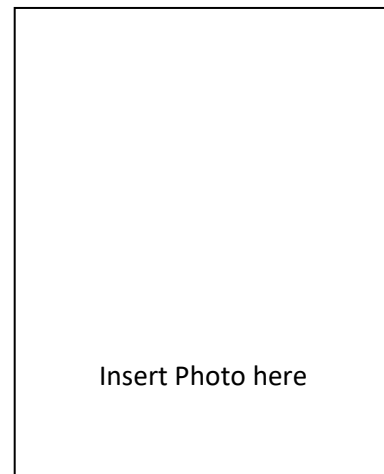
DOB:

School:

Year Group:

Date of Plan:

Review Date:



1 FAMILY CONTACT INFORMATION

Name		
Relationship		
Telephone number	Home: Work:	Mobile:
Email		
Name		
Relationship		
Telephone number	Home: Work:	Mobile:
Email		
Paediatric Diabetes Nurse		
Telephone number		

2 DESCRIPTION OF CONDITION AND DETAILS OF INDIVIDUAL TREATMENT

-has **Type 1 Diabetes**
-manages her/his condition with a healthy diet, exercise and insulin
- **Insulin** requirements as follows:
 - Multi-dose regime i.e. requires insulin with all meals
 - Insulin Pump Therapy
 - Other – please state
-will need to attend **clinic appointments** to review her/his diabetes.
- Appointments are every 3 months as a minimum, but may be more frequent.
- In accordance with **National Guidance**, school staff should be released to attend diabetes training sessions.

Name:
NHS No:
DOB:

3 BLOOD GLUCOSE MONITORING

The pupil has a blood glucose monitor, so they can test their blood glucose (BG). BG monitoring is an essential part of daily management, wherever possible the pupil should be encouraged to take responsibility for managing their own medicines and BG equipment in school. **THEIR EQUIPMENT MUST NOT BE SHARED AND SHOULD BE AVAILABLE TO THE PUPIL AT ALL TIMES – NOT LOCKED AWAY.**

(Check which applies)

- Blood Glucose monitoring to be carried out by a trained adult.
- This child requires supervision with Blood Glucose monitoring
- This pupil is independent in Blood Glucose monitoring
- Other - Continuous Glucose Meter / Libre

This procedure should be carried out:

- In class or if preferred, in a clean private area with hand washing facilities.
- **Hands must be washed and dried prior to the test.**
- Blood glucose targets pre meal mmol/L and mmol/L 2 hours after meals
- Lancets and blood glucose strips should be disposed of safely.

There are a wide range of different blood glucose meters available, some have a built in automated bolus calculator.

4 INSULIN ADMINISTRATION WITH MEALS

Check if applies/if not go to section 5

(Check which applies)

- Insulin to be administered by a trained adult
- Supervision is required during insulin administration
- The pupil is independent and can self-administer the insulin
- This pupil is on an insulin pump (see further information following)



The pupil requires variable amounts of quick acting insulin, depending on how much they eat and their blood glucose level.

(Check which applies)

They have a specific insulin to carbohydrate (CHO) ratio (I:C) with insulin sensitivity factor (ISF)

They are on set doses of insulin

This procedure should be carried out:

- In class, or if preferred in a clean private area with hand washing facilities
- The pupil should always use their own injection device; or sets
- All needles should be used and disposed of in accordance with the school's local policy

5 INSULIN ADMINISTRATION

		Advice
Insulin Name	Time	
Insulin Name	Time	
Insulin Name	Time	

Name:
NHS No:
DOB:

6 SUGGESTED DAILY ROUTINE

If any concerns or pupil feels unwell check BG level .. 'TEST DON'T GUESS!!'

	Time	Notes
Arrive School		
Morning Break		
Lunch		
Afternoon Break		
School Finish		
Other		

Please refer to 'Home-School' Communication Diary

Please refer to School Planner

Name:
NHS No:
DOB:

7 SPORTING ACTIVITY/ DAY TRIPS AND RESIDENTIAL VISITS

Governing bodies should ensure that risk assessments, planning and arrangements are clear to ensure this pupil has the opportunity to participate in all sporting activities. School should ensure reasonable adjustments as required.

<p>Specific instruction if on insulin pump therapy:</p> <p>During contact sports the pump should be disconnected (NEVER exceed 60 minutes.) Please keep safe whilst disconnected</p>	<p>Advice</p>
<p>Extra snacks are required:</p> <p>PRE-EXERCISE</p>	<p>Advice</p>
<p>POST-EXERCISE</p>	<p>Advice</p>

8 HYPOGLYCAEMIA

('Hypo' or 'Low Blood Glucose')

BG: Below 4 mmol/l

INDIVIDUAL HYPO- SYMPTOMS FOR THIS PUPIL ARE:	Pale	<input type="checkbox"/>	Poor concentration	<input type="checkbox"/>	Other
	Sudden change of personality	<input type="checkbox"/>	Sleepy	<input type="checkbox"/>	
	Crying	<input type="checkbox"/>	Shaking	<input type="checkbox"/>	
	Moody	<input type="checkbox"/>	Visual changes	<input type="checkbox"/>	
	Hungry	<input type="checkbox"/>			

..... will show the following symptoms if their blood glucose is low. If any of these symptoms are displayed check blood glucose immediately.

- Check blood glucose to confirm hypo, and treat promptly. See 8a Appendix.
- Do not send this pupil out of class unaccompanied to treat a hypo
- Call first aider to attend pupil if particularly unwell
- Hypos are described as either mild/moderate or severe depending on the individual's ability to treat him/her.
- **The aim is to treat, and restore the BG level to above 4.0 mmol/L**

A hypo box should be kept in school containing fast acting glucose and long acting carbohydrate. Staff and the pupil should be aware of where this is kept and it should be taken with them around the school premises, if leaving the school site, or in the event of a school emergency. It is the parent's responsibility to ensure this emergency box is adequately stocked; independent pupils will carry their testing kit and hypo treatment with them.

See Appendices for flowcharts for:

8a. Treatment of Hypoglycaemia for a Pupil on Pump Therapy

Name:
NHS No:
DOB:



9 HYPERGLYCAEMIA

(High blood glucose)

Children and pupils who have diabetes may experience high blood glucose (hyperglycaemia) when the blood glucose levels are above mmol/L.

If the pupil is well, there is no need for them to be sent home, but parents/guardian should be informed at the end of the day that the pupil has had symptoms of high blood glucose.

See Appendices for flowcharts.

9a. Treatment of Hyperglycaemia for a Pupil on Pump Therapy

Name:
NHS No:
DOB:

9b. Blood Ketone Monitoring Guide:

- **Below 0.6mmol/L** **Normal Range**
- **Between 0.6-1.5mmol/L** **Potential problems – SEEK ADVICE from parents**
- **Above 1.5mmol/L** **High risk – SEEK URGENT ADVICE**

Additional information regarding blood ketone testing for this pupil	
----------------------------------------------------------------------	--

- School to be kept informed of any changes by parent in this pupil's management.
- The pupil with diabetes may wear identification stating they have diabetes. These are in the form of a bracelet, necklace, watch or medical alert card.
- During exams, reasonable adjustments should be made to exam and course work conditions if necessary, this should be discussed directly with this pupil. This pupil should be allowed to take into the exam the following: blood glucose meter, extra snacks; medication and hypo treatment.
- Specific extra support may be required for the pupil who has a long term medical condition regarding educational, social and emotional
- It is the parent's/carer's responsibility to monitor and restock all supplies in liaison with school staff.



Please use this box for any additional information

Name:
NHS No:
DOB:

This Individual Health Care Plan has been initiated and updated in consultation with the pupil, family, diabetes specialist nurse and a member of staff from the educational setting.

Plan Approved By:	Name	Signature	Date
Pupil			
Parents/Guardians			
Diabetes Nurse Specialist			
School Representative			

10 Supporting Evidence

- *Supporting pupils at school with medical conditions; Department of Education, September 2014.*
- *NICE clinical guideline NG18: (type 1 and type 2) in children and young people, diagnosis and management; August 2015.*
- *Managing Medicines in School and Early Years Setting; Department of Health, 2005.*
- *ISPAD Clinical Practice Consensus Guidelines; 2014.*
- *Making Every Young Person with Diabetes Matter; Department of Health, 2007.*

The following should always be available in school, please check:

Hypo treatment: fast acting glucose	<input type="checkbox"/>	Insulin pen and appropriate pen needles	<input type="checkbox"/>
Glucagon gel / DextroGel	<input type="checkbox"/>	Cannula and reservoir for pump set change	<input type="checkbox"/>
Finger prick device, BG monitor and strips	<input type="checkbox"/>	Spare battery	<input type="checkbox"/>
Ketone testing monitor and strips	<input type="checkbox"/>	Up to date care plan	<input type="checkbox"/>
Snacks	<input type="checkbox"/>		

Governing bodies are responsible to ensure adequate members of staff have received suitable training.

Name:
NHS No:
DOB:

Training Log

Staff Name	Training Delivered	Trainer	Date

****See Training Log in School****

Authors: Hampshire Hospitals Trust – Winchester & Basingstoke
 University Hospital Southampton NHS Trust
 Portsmouth Hospitals NHS Trust
 Dorset County Hospital NHS Trust
 Isle of Wight NHS Trust
 Poole NHS Trust
 Salisbury NHS Trust

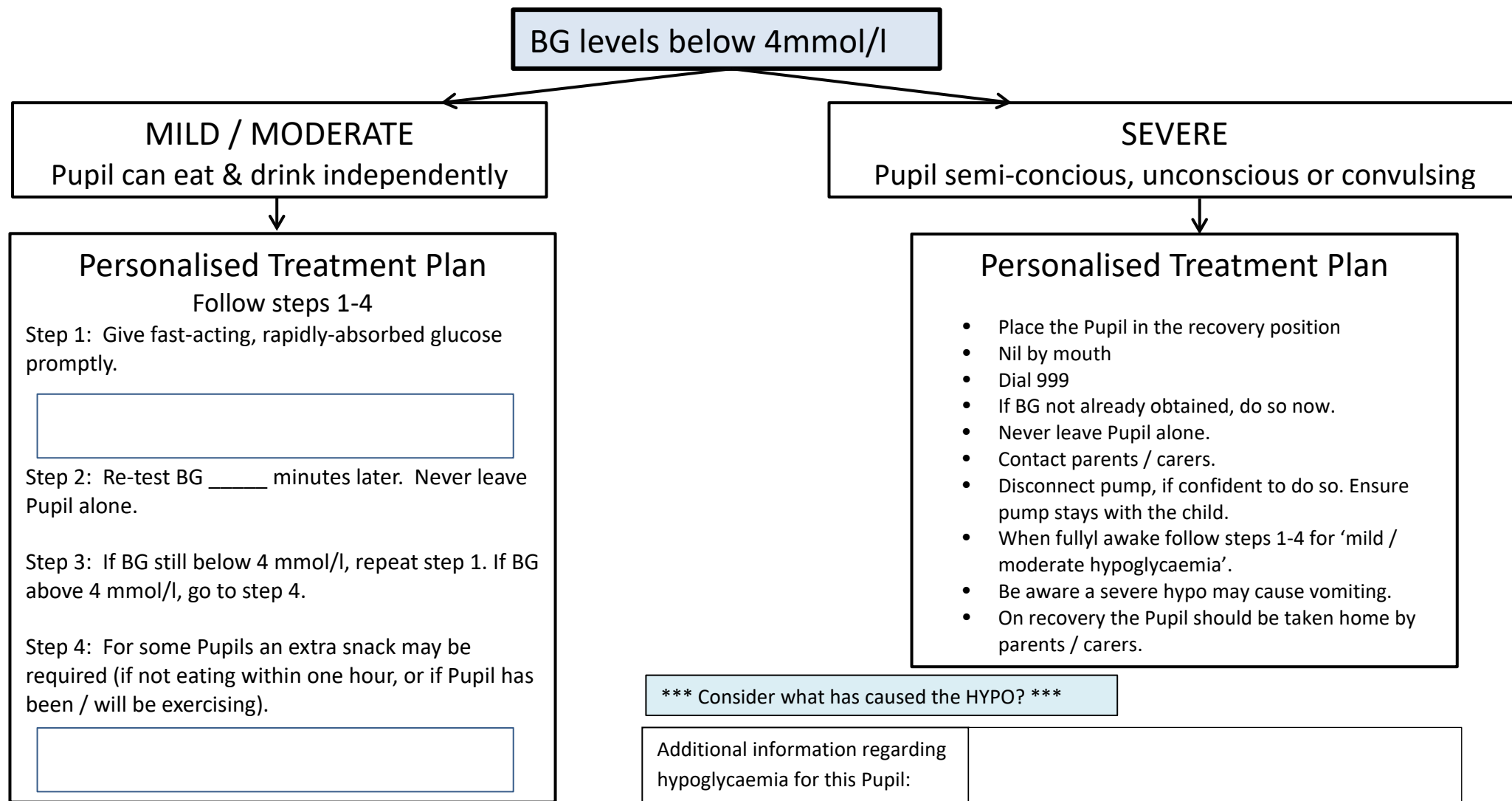
APPENDICES on following pages.

Adapted from National Network HCP – July 201



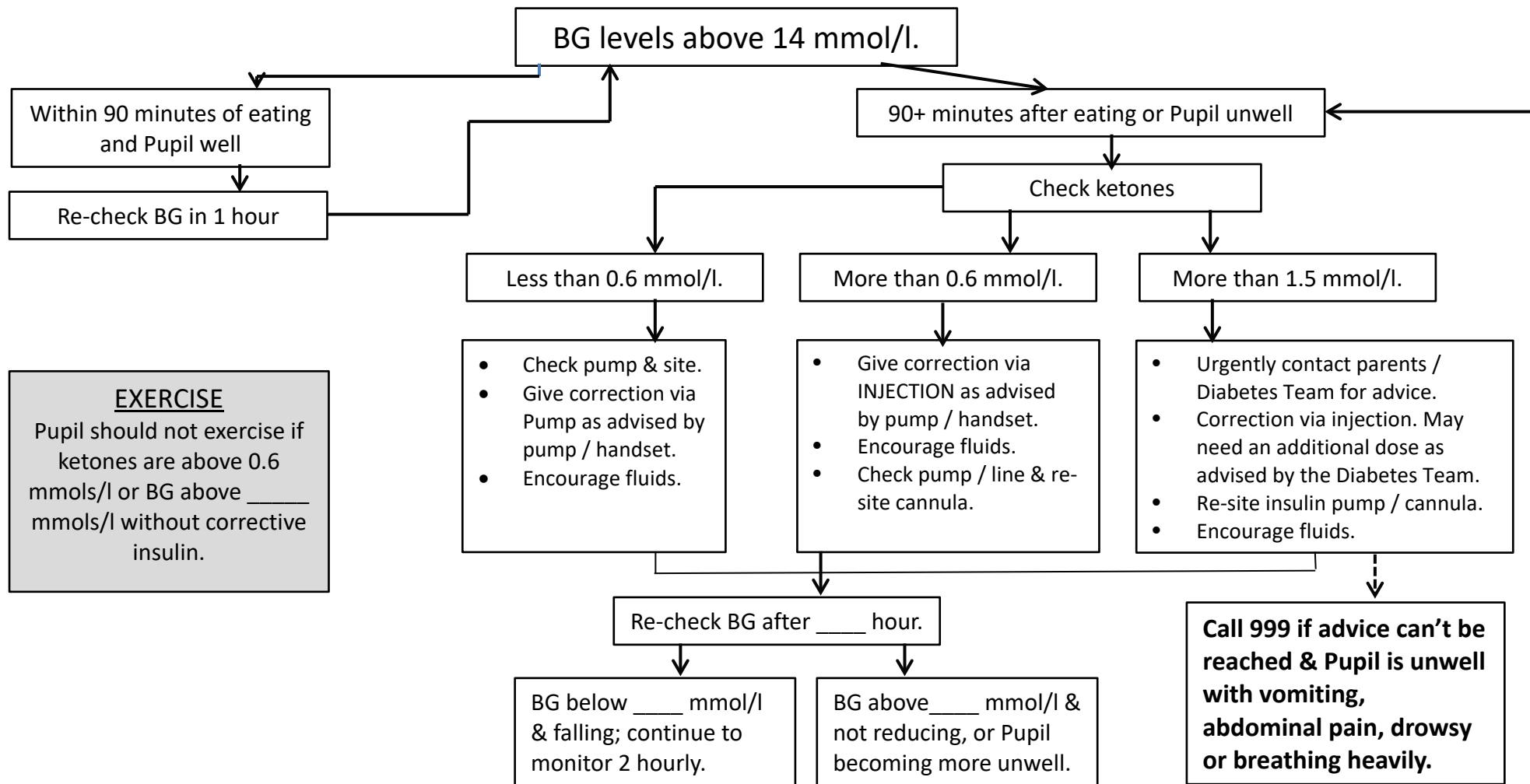
Name: NHS No: DOB:	Page 12
--------------------------	-----------

8a. Treatment of Hypoglycaemia for a Pupil on Pump Therapy



Name:
NHS No:
DOB:

9a. Treatment of Hyperglycaemia for a Pupil on Pump Therapy



Additional information regarding hyperglycaemia for this Pupil:

Name:
NHS No:
DOB: